



ASC Utilization Report

State Form 49933 (R3/6-05)

Indiana State Department of Health

Acute Care

I. Center Identification

Organization Name: NORTHSIDE GASTROENTEROLOGY ENDOSCOPY CENTER

Street Address: 8424 Naab Road Suite 3G

City: Indianapolis

County: Marion

ASC Web Address: <http://www.northsidegastrocenter.com/>

Fiscal Year: 2012

Accredited: ☒ Yes ☐ No

Name of Accrediting Body: AAAHC

Deemed Status: ☐ Yes ☒ No

Corporate Tax Status: ☒ For Profit ☐ Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	4

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	8920	10546
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
E45380	2813	
E45378	2106	
E43239	2037	
E45385	1538	
E43450	644	
E43235	471	
G0105	378	

G0121	183
E45381	69
E45330	64

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
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